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Date: August 18, 2003

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From: Richard J. Paciulan

Reg No. 28,248

Re: Application No. 09/768,674 Filed January 24, 2001

Entitled METHOD AND APPARATUS FOR EFFICIENT MIXED SIGNAL

PROCESSING IN A DIGITAL AMPLIFIER

File: 41289/RJP/B600

I HEREBY CERTIFY THAT THIS PAPER IS BEING FACSIMILE TRANSMITTED TO THE UNITED STATES PATENT AND TRADEMARK OFFICE ON August 18, 2003.

C. Healion

*Attachments: Petition to Withdraw from Issue, RCE, Information Disclosure Statement w/ PTO/SB/08A/B and references

<u>CAH PAS521617.1-"-08/18/03 10:</u>38 AM

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REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

	C. Healion		
		AUG 1 8 200	
Application Number Filing Date Inventor(s)	: 09/768,674 : January 24, 2001 : Erlend Olson, et al.	PETITIONS OFFI	
Title	: METHOD AND APPARATUS FOR I PROCESSING IN A DIGITAL AMPLIFIE		
Group Art Unit	: 2819		
Examiner Name Docket No.	: Patrick G. Wamsley : 41289/RJP/B600	Date: August 18,	
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REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Application No. 09/768,674

Other:

		omer.
b.	Enclosed	
		Amendment/Reply
		Affidavit(s)/Declaration(s)
	X_	Information Disclosure Statement
		Documents under 37 CFR § 1.48
		Petition for Extension of Time
	<u>X</u>	Other: Petition to Withdraw from Issue Under 37 CFR 1.313

The Examiner is requested to telephone the undersigned promptly following receipt and initial review of the application in light of the Submissions(s) for the conduct of, or the scheduling of, a telephone interview in the application.

Please address all correspondence to CHRISTIE, PARKER & HALE, LLP, P.O. Box 7068, Pasadena, CA 91109-7068.

Respectfully submitted,

CHRISTIE, PARKER & HALE, LLP

Righard J. Paciulan Reg. No. 28,248

626/795-9900

RJP/cah

REQUEST FOR CONTINUED EXAMINATION (RCE) FEE CALCULATION SHEET

Application No. 09/768,674

PART I — BASIC FEE			
BASIC FEE	Small Entity \$375.00	Large Entity \$750.00	\$750

	Claims Remaining After Amendment	Highest Number Previously Paid For	Number Extra Claims	Small Entity Rate	Large Entity Rate	FEE
Total Claims	7	*20	0	x \$9.00	x \$18.00	
Independent Claims	2	**3	0	x \$42.00	x \$84.00	
First Presentation of Multiple Dependent Claim \$140.00 \$280.00						
TOTAL CLAIMS FEE						\$ 0
List Independent	Claims: 1, 7					

^{*} IF THE "HIGHEST NUMBER OF TOTAL CLAIMS PREVIOUSLY PAID FOR" IS LESS THAN 20, WRITE "20" IN THIS SPACE.

** IF THE HIGHEST NUMBER PREVIOUSLY PAID OR IS 3 OR LESS, WRITE "3" IN THIS SPACE.

- 1. FEES (The RCE fee under 37 CFR § 1.17(e) is required by 37 CFR § 1.114 when the RCE is filed.)
 - a. Amount (total from Fee Calculation Sheet)
 Please charge the Basic Fee amount of \$750 to the Deposit Account noted below.
 - b. X The Commissioner is hereby authorized to charge any fees under 37 CFR 1.16 and 1.17 which may be required for this transaction to Deposit Account No. 03-1728. Please show our docket number with any charge or credit to our Deposit Account.

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